## FEC FORM 3X

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## REPORT OF RECEIPTS AND DISBURSEMENTS

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**FEC FORM 3X** 

Rev. 12/2004

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1.	NAME (	OF TEE (in full)	TYPE OR PRINT ▼			Example: If typing, type over the lines.			128 EMM AIL CENTE			i O	
<b>R</b> .,	<u> A</u> ISISI	THE TO	CIH			<del></del>	<u> </u>		<u> </u>	<u>         </u>			
ADE	DRESS (n	umber and street)	6116	KE	AR WIEIY	CIR		<del>                                     </del>					
Check if different than previously reported. (ACC)			MAIN	CHIE	STER			L LA	LAIN LOIS 10 14 14 14 14 14 14 14 14 14 14 14 14 14				
2.	FEC ID	ENTIFICATION NU	JMBER ▼		CITY 🛦			STA	STATE A ZIP C		ZIP CO	ODE A	
	c 0	054 73	72		3. IS THIS REPORT	т 🗶	NEW (N)	OR		AMENDE (A)	ED .		
4.	TYPE OF REPORT (Choose One)  (a) Quarterly Reparts:		(b) Monthly Report Due On:		Feb 20 (M2 Mar 20 (M3 Apr 20 (M4	3)	May 20  Jun 20  Jul 20 (	(M6)	S	ug 20 (Mi ep 20 (Mi	9)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE)	
	X	April 15 Quarterly Report (Q1 July 15 Quarterly Report (Q2 October 15 Quarterly Report (Q3	)22)	12-Day PRE-Ele	ction	Primary (1	Primary (12P) Convention (12C)			ral (12G) al (12S)	Runoff (12R)		
		January 31 Year-End Report (Y			Election on	N/2 1A7	/ D D	, , y	Y Y	Y	in the State o	f	
		July 31 Mid-Year Report (Non-electio Year Only) (MY)		30-Day POST-E		General (	30G)		Runot	f (30R)		Special (30S)	
		Termination Report (TER)			Election on	m es	/ U D	/ <b>Y</b>	<b>Y Y</b>	Y	in the State o	f ·	
5.	Covering		M / D		ě í ě	through					ŏΪΫ́		
	I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  Type or Print Name of Treasurer  MICHAEL HAFTWICK												
Sigr	nature of	Treasurer	N				Date	· O	3 ′	2   4 ′	Ϋ́ŠΫ́		
NOT	ΓE: Submi	ssion of false, erron	eous, or inc	omplete ir	nformation may	subject the p	oetson sig	ning this I	Report t	o the pen	alties of 2 t	J.S.C. §437g.	